EMAIL SERVER REPORTING FORM DUE DATE- OCTOBER 31, 2004

Organization Name: _						
Date:						
Contact Information	า (Requ	uired Informa	tion):			
	Requestor Contact		Technical Contact		Computer Security	
Name						
Position						
Phone						
Email Address						
Please list below the Em	ail Serve	ers your organiza	ation will requi	re listed i	n the firewall.	
		, 0	•			
I.P. Address of Email Server		Host/Domain Name		Proto	Protocol Requested	
<u>Authorization</u>						
Requesting Manager/Director/CIO Signature:						
Date of Signature:						
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Please return form By October 31, 2004 to (Include attachments of any other pertinent information)						
<u>iiiioiiiiatioii)</u>						
	Via Ema	il - <u>ISOC@sta</u>	te.co.us			
	Via Fax	- (303) 239	-4609			
Via US Mail: - DoIT - Computer Security Unit						
690 Kinling Street						

If you have any questions, please call the DoIT Service Center at (303) 239-4357 or (877) 632-2487.

Lakewood, CO 80215